

**Application for
Certificate of Compliance**

Dept. of Building & Safety - Housing Codes
(402) 441-7785 Fax: (402) 441-8214
555 S. 10th St., (City/County Bldg, Room 203), Lincoln, NE 68508-2803

Proposed Closing Date: _____

Date Received: [Office Date Stamp above]

Address of Building Being Sold:

Legal Description: _____

☐ Seller(s): _____ Buyer(s): _____

Address _____ Address _____

Apt/Suite # _____ Apt/Suite # _____

City _____ City _____

State _____ Zip Code _____ - _____ State _____ Zip Code _____ - _____

Contact Person _____ Contact Person _____

Work ☎ (_____) _____ - _____ Work ☎ (_____) _____ - _____

Home ☎ (_____) _____ - _____ Home ☎ (_____) _____ - _____

Cellular ☎ (_____) _____ - _____ Cellular ☎ (_____) _____ - _____

Fax (_____) _____ - _____ Fax (_____) _____ - _____

☐ COC Fee is \$90.00 per building for the first three (3) units & \$12.00 for each additional unit.

Total # of Units: _____	<div style="text-align: right;">1st (3) units 90.00</div> <div>- 3 = _____ x 12.00 ! + . _____ .00</div> <div style="text-align: right;">Total Fee: \$ _____ .00 ☐</div>
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☐ COC fee must be included with this application.

Seller (mandatory): X _____ Date ____ / ____ / ____

Buyer: X _____ Date ____ / ____ / ____

OFFICE USE ONLY

COC _____

Date Fee Paid: ____ - ____ - ____ Inspection day of week: _____, date ____ - ____ - ____, Time ____:____ ☐ am ☐ pm

REF (copy): ____ - ____ - ____ by: _____ Approved by _____ Date: ____ - ____ - ____